

TOWN OF DAVIE
TOWN COUNCIL AGENDA REPORT

TO: Mayor and Councilmembers

FROM/PHONE: Manny Diez, Public Works & Capital Projects Director, (954) 797-1245

PREPARED BY: Daniel J. Oyler, Assistant Public Works Manager, (954) 797-1840

SUBJECT: Resolution

AFFECTED DISTRICT: All

ITEM REQUEST: Schedule for Council Meeting

TITLE OF AGENDA ITEM: A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, AUTHORIZING THE APPROPRIATE TOWN OFFICIALS TO ACCEPT THE BID RECOMMENDATION FOR JANITORIAL SERVICES FOR THE POLICE DEPARTMENT.

REPORT IN BRIEF: The bid was advertised state-wide in Florida Bid Reporting, Nationally in Bid Net, and also posted on the Town's website. The Town sent out forty eithty (48) bids for janitorial service for the Police Department. The Town received eleven(11) bid responses for this service. The recommendation is for Perm-A-Care Janitorial Services, Inc. as the lowest responsive and responsible bidder

PREVIOUS ACTIONS: None

CONCURRENCES: The recommended award had been reviewed by the Public Works Department and the Bid Specification Committee, whom concur with the decision to award the bid to Perm-A-Care Janitorial Services, Inc.

FISCAL IMPACT: Yes

Has request been budgeted? Yes

If yes, expected cost: \$35,459.00

Account Name: Internal Charges / 001-0520-521-0450

If no, amount needed: \$

What account will funds be appropriated from:

Additional Comments:

RECOMMENDATION(S): Motion to approve the resolution.

Attachment(s): Resolution, Bid Recommendation, Procurement Authorization, Bid Opening Report and Corporation Information.

RESOLUTION NO. _____

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA,
AUTHORIZING THE APPROPRIATE TOWN OFFICIALS TO
ACCEPT THE BID RECOMMENDATION FOR JANITORIAL
SERVICE FOR THE POLICE DEPARTMENT

WHEREAS, The Town is in need of Janitorial Service for the Police Department;
and

WHEREAS, The Town solicited sealed bids for Janitorial Service for the Police
Department; and

WHEREAS, after review, the Town Council wishes to accept the bid from Perm-
A-Care Janitorial Services, Inc.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN
OF DAVIE, FLORIDA:

SECTION 1. The Town Council hereby accepts the bid from Perm-A-Care
Janitorial Services, Inc. for Janitorial Service for the Police Department for \$35,459.00.

SECTION 2. The Town Council hereby authorizes the expenditures from
account number 001-0520-521-0450.

SECTION 3. The initial length of the contract will be from October 5, 2007 to
October 5, 2009, with an optional two-year renewal.

SECTION 4. This Resolution shall take effect immediately upon its passage and
adoption.

PASSED AND ADOPTED THIS _____ DAY OF _____, 2007.

MAYOR/COUNCILMEMBER
Attest:

TOWN CLERK

APPROVED THIS _____ DAY OF _____, 2007

TOWN OF DAVIE PROCUREMENT AUTHORIZATION

1001-0520-521-0430 Police Dept. Sanitorial \$47,000/yr.
BLDG MAINT. INTERIOR

METHOD OF PROCUREMENT (check the one that applies)

- ☒ Open Competitive Bidding
☐ Piggyback on Contract Number _____
☐ Sole Source
☐ Request For Proposals

SPECIFICATIONS & LIST OF VENDORS MUST BE ATTACHED

Signed MC 6/22/07
Department Head

Have Funds been Reserved RSN. 36008

Date 7/3/07 Signed HP

Signed Harry Shuman
Town Administrator

VENDOR	BIDS SUBMITTED	COST
PERM-A-CARE JANITORIAL SERVICES, INC.		\$ 35,459.00
TRIANGLE SERVICES		48,426.00
KLEEN MASTER		51,708.80
CLASS ACT CLEANING		51,854.52
NINETY FIVE SOUTH		56,891.04
GME		61,299.00
SFM SERVICES, INC.		64,510.40
FRANCIS CLEANING SERVICES		72,876.00
AJA EMPLOYMENT OF MIAMI		86,052.56
PIROS ENTERPRISES		96,324.00
FACILITY CLEANERS		114,800.00
BBS CLEAN BLDG CONTRACTORS	NO BID	
VISTA BLDG. MAINT. SVCS.	NO BID Signed <u>Ant</u>	
	Procurement Manager	

BID SPECIFICATION COMMITTEE'S RECOMMENDATION

Vendor	Cost
PERM-A-CARE JANITORIAL SERVICES, INC.	\$35,459.00

BID OPENING REPORT

BID NAME: Janitorial Services - PD Bldg.TIME: 2:04 PMBID NUMBER: B-07-101DATE: 8/14/07ESTIMATED COST: 47,000 / yr.

NO.	CONTRACTOR'S NAME	BID AMOUNT	COMMERCIAL RANKING
1.	Facility Cleaners	114,800.00	11
2.	See Clean Bldg. Contractors	None Responsive	—
3.	Triangle Services	48,426.00	2
4.	Francis Cleaning Service	72,876.00	8
5.	Perm-A-Care	35,459.00	1
6.	Ninety Five South	56,991.04	5
7.	GME	61,299.00	6
8.	Class Act Cleaning	51,854.52	4
9.	Kleen Master	51,708.80	3
10.	Vista Bldg. Maint. Services	NO Bid	—

REMARKS

SPECS SENT TO FORTY-EIGHT (48) PROSPECTIVE BIDDERS
TOWN REC'D THIRTEEN (13) RESPONSES (ELEVEN (11) BIDS + TWO (2) NO BID RESPONSES)

NOTE: THE ABOVE BID AMOUNTS HAVE NOT BEEN CHECKED, AND BID TOTALS ARE
 SUBJECT TO CORRECTION AFTER THE BIDS HAVE BEEN COMPLETELY REVIEWED.

THIS IS ONLY A FINANCIAL RANKING OF ALL THE BIDS RECEIVED. THE USING
DEPARTMENT IS RESPONSIBLE FOR REVIEWING THE BIDS FOR COMPLIANCE WITH ALL
THE BID SPECIFICATIONS PRIOR TO SUBMITTAL OF LETTER OF RECOMMENDATION.

PURCHASING OFFICIAL: Elma GladstonDATE: 8/14/07WITNESS: Angela SalinasDATE: 8/14/07

BID OPENING REPORT

BID NAME: Janitorial Services - PD Bldg.TIME: 2:04pmBID NUMBER: B-07-101DATE: 8/14/07ESTIMATED COST: \$47,000/yr.

NO.	CONTRACTOR'S NAME	BID AMOUNT	COMMERCIAL RANKING
1.	Digos Enterprises	\$96,334.00	10
2.	AIA Employment of Miami	\$86,052.56	9
3.	SFM Services, Inc.	\$64,510.40	7
4.			
5.			
6.			
7.			
8.			
9.			
10.			

REMARKS

NOTE: THE ABOVE BID AMOUNTS HAVE NOT BEEN CHECKED, AND BID TOTALS ARE SUBJECT TO CORRECTION AFTER THE BIDS HAVE BEEN COMPLETELY REVIEWED.

THIS IS ONLY A FINANCIAL RANKING OF ALL THE BIDS RECEIVED. THE USING DEPARTMENT IS RESPONSIBLE FOR REVIEWING THE BIDS FOR COMPLIANCE WITH ALL THE BID SPECIFICATIONS PRIOR TO SUBMITTAL OF LETTER OF RECOMMENDATION.

PURCHASING OFFICIAL: Elmer BlantonDATE: 8/14/07WITNESS: Angela SalinasDATE: 8/14/07

**Request for Taxpayer
Identification Number and Certification**

Give form to the
requester. Do not
send to the IRS.

Name (as shown on your income tax return)
PERMA-CARE.

Business name, if different from above

Check appropriate box ☐ Individual/ Sole proprietor ☒ Corporation ☐ Partnership ☐ Other ☐ Exempt from backup withholding

Address (number, street, and apt. or suite no.)
PO Box 8101

City, state, and ZIP code
DELRAY BEACH, FL 33482-

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.

Note: If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number
_____|_____|_____|_____|_____|_____|


OR
Employer identification number
65-0464529

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here Signature of U.S. person  Date **7-29-07**

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester), and, when applicable, to

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding.
- Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a partner if you are

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity.

Vendor/Bidder Disclosure

I, Ken Cosentino, being first duly sworn state that:
The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: Perm-A-Care
Address: 12078 Colony Preserve Dr.
Boynton Beach, FL 33436
FEIN 65-046 4529
State and date of incorporation FLORIDA 1994

OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
<u>KENNETH N. COSENTINO</u>	<u>12078 Colony Preserve Dr.</u>	<u>50</u> %
	<u>Boynton Beach FL 33436</u>	%
<u>LYNDA F. COSENTINO</u>	<u>S/A/A</u>	<u>50</u> %
		%

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

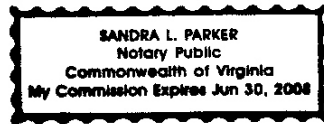
Full Legal Name	Address
_____	_____
_____	_____
_____	_____
_____	_____

By: [Signature]
Signature of Affiant

Date: Aug 3, 2007

KENNETH N. COSENTINO
Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 3rd day of
August 2007, by Kenneth N. Cosentino, he/she is
personally known to me or has presented FL DL as
identification. C253-514-59-368-0 exp. 10-8-2008



Sandra L. Parker
Notary Public, State of Florida at Large
State of Virginia
Sandra L. Parker
Print or Stamp of Notary

287697
Serial Number

My Commission Expires: 6-30-2008

Florida Profit Corporation

PERM-A-CARE JANITORIAL SERVICES, INC.

Filing Information

Document Number P93000085967
FEI Number 650464529
Date Filed 12/16/1993
State FL
Status ACTIVE
Effective Date 01/03/1994
Last Event AMENDMENT
Event Date Filed 04/16/1996
Event Effective Date NONE

Principal Address

12078 COLONY PRESERVE DR
BOYNTON BEACH FL 33436

Changed 04/12/2007

Mailing Address

PO BOX 8101
DELRAY BEACH FL 33482-8101

Changed 03/23/2005

Registered Agent Name & Address

COSENTINO, KENNETH
12078 COLONY PRESERVE DRIVE
BOYNTON BEACH FL 33436 US

Name Changed: 03/23/2005

Address Changed: 04/12/2007

Officer/Director Detail

Name & Address

Title S

COSENTINO, LYNDIA
12078 COLONY PRESERVE DR
BOYNTON BEACH FL 33436

Title PSTD

COSENTINO, KEN
12078 COLONY PRESERVE DR
BOYNTON BEACH FL 33436

